

**APPLICATION DATA SHEET**

**Application Information**

Application number::  
Filing Date::  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD disks::  
Number of copies of CDs::  
Sequence submission?::  
Computer Readable Form (CRF)?:: No  
Number of copies of CRF::  
Title :: METHOD FOR IMAGING AND DIFFERENTIAL ANALYSIS OF CELLS  
Attorney Docket Number:: 120122.405USPC  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure:: 1  
Total Drawing Sheets:: 5  
Small Entity?:: Yes  
Petition included?:: No  
Petition Type::  
Licensed U.S. Gov't Agency::  
Contract or Grant No::  
Secrecy Order in Parent Appl.?:: No

**First Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full capacity  
Given Name:: Thaddeus  
Middle Name:: C  
Family Name:: George  
Name Suffix::  
City of Residence:: Seattle  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of mailing address:: 1712 Northwest 63rd Street  
City of mailing address:: Seattle  
State or Province of mailing address:: WA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 98107

**Second Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full capacity  
Given Name:: David  
Middle Name:: A  
Family Name:: Basiji  
Name Suffix::  
City of Residence:: Seattle  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of mailing address:: 6538 Greenwood Avenue North  
City of mailing address:: Seattle  
State or Province of mailing address:: WA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 98103

**Third Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full capacity  
Given Name:: Brian  
Middle Name:: E  
Family Name:: Hall  
Name Suffix::  
City of Residence:: Seattle  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of mailing address:: 1121 17th Avenue, Apartment A  
City of mailing address:: Seattle  
State or Province of mailing address:: WA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 98122

**Fourth Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full capacity  
Given Name:: William  
Middle Name:: E  
Family Name:: Ortyn  
Name Suffix::  
City of Residence:: Bainbridge Island  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of mailing address:: 11546 Matsu Place Northeast  
City of mailing address:: Bainbridge Island  
State or Province of mailing address:: WA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 98110

**Fifth Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full capacity  
Given Name:: Michael  
Middle Name:: J  
Family Name:: Seo  
Name Suffix::  
City of Residence:: Mercer Island  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of mailing address:: 8120 Southeast 77th Place  
City of mailing address:: Mercer Island  
State or Province of mailing address:: WA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 98040

**Sixth Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full capacity  
Given Name:: Philip  
Middle Name:: J  
Family Name:: Morrissey  
Name Suffix::  
City of Residence:: Bellevue  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of mailing address:: 4412 153rd Avenue Southeast  
City of mailing address:: Bellevue  
State or Province of mailing address:: WA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 98006

**Seventh Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full capacity  
Given Name:: Cathleen  
Middle Name:: A  
Family Name:: Zimmerman  
Name Suffix::  
City of Residence:: Bainbridge Island  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of mailing address:: 7085 Northeast Bay Hill Road  
City of mailing address:: Bainbridge Island  
State or Province of mailing address:: WA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 98110

**Correspondence Information**Correspondence Customer Number :: **00500****Representative Information**

Representative Customer Number::		<b>00500</b>
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**Domestic Priority Information**

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US2005/008870	03/16/05
PCT/US2005/008870	An application claiming the benefit under 35 USC 119(e)	60/553,502	03/16/04

**Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::

**Assignee Information**

Assignee name::	Amnis Corporation
Street of mailing address::	2505 Third Avenue, Suite 210
City of mailing address::	Seattle
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98121